

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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	OMB APPROVAL					
	OMB Number:	3235-0076				
	Expires:	May 31, 2005				
	Estimated average burden hours per response					

SEC USE ONLY						
Prefix	Serial					
DATE R	ECEIVED					
	1					

Name of Offering (	check if this is an amendment and name has changed, and indicate change.)  NC VENTURE GROUP LL	
Filing Under (Check box) Type of Filing:		₩ ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the informatio	n requested about the issuer	
Name of Issuer ( che	eck if this is an amendment and name has changed, and indicate change.) $NCVENTUREGROUPLL$	2
Address of Executive Off 5120 BUA	ices (Number and Street, City, State, Zip Code)  OAK CIRCLE RALEIGH, NC 27612	Telephone Number (Including Area Code) (919) 782 - 9689
Address of Principal Busi (if different from Executi	iness Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Busi	ness	
Type of Business Organiz	☐ limited partnership, already formed ☐ other (☐ limited partnership, to be formed	04038491 please specify):
	of Incorporation or Organization: Month Year  of Incorporation or Organization: Estimate The Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated  JUL 20 2004
GENERAL INSTRUCT	IONS	HOMSON F
Federal: Who Must File: All issuer 77d(6).	s making an offering of securities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
and Exchange Commissio	must be filed no later than 15 days after the first sale of securities in the offering on (SEC) on the earlier of the date it is received by the SEC at the address given be to it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Sec	urities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
	i) copies of this notice must be filed with the SEC, one of which must be manual ally signed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
	new filing must contain all information requested. Amendments need only repequested in Part C, and any material changes from the information previously supp.	
Filing Fee: There is no f	ederal filing fee.	
ULOE and that have add are to be, or have been n	to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sopted this form. Issuers relying on ULOE must file a separate notice with the snade. If a state requires the payment of a fee as a precondition to the claim for this notice shall be filed in the appropriate states in accordance with state law, completed.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall
	ATTENTION	
	e in the appropriate states will not result in a loss of the federal e I notice will not result in a loss of an available state exemption unle notice.	
SEC 1972 (6-02)	Persons who respond to the collection of information contained required to respond unless the form displays a currently valid ON	in this form are not 11 of 9

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last'name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Executive Officer Beneficial Owner General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. P	NFORMAT	ION ABOU	T OFFERI	NG		_		
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No			
• .	Answer also in Appendix, Column 2, if filing under ULOE.								لا	ليا			
2.	What is the minimum investment that will be accepted from any individual?									S			
	The state of the s									Yes	No		
3.	Does the offering permit joint ownership of a single unit?							************					
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full	Name (	Last name	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	umber and	Street, Ci	ty, State, Z	Cip Code)	<u></u>					
Nan	ne of As:	sociated Br	oker or De:	aler									
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Stat			Listed Has										
	(Check	"All States	" or check	individual	States)			***************************************				A1	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OII WV	GA MN OK WI	MS OR WY	MO PA PR
Full	Name (	Last name	first, if indi	ividual)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)				. 10-11		<del></del>
Nan	ne of As	sociated Br	oker or De	aler				~-				*****	
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	RI	SC	SD	TN	TX	UT	VT	VA	$\overline{WA}$	WV	WI	WY	PR
Full	l Name (	Last name	first, if ind	ividual)	-								
Bus	iness or	Residence	Address (1	Number an	d Street, C	City, State, 7	Zip Code)						
Nan	ne of As	sociated Br	oker or De	aler	. <u>.</u>			*					
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	AL IL MT	IN NE SC	AZ IA NV SD	AR KS NII TN	CA KY NJ TX	LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OII WV	GA MN OK WI	MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and							
	already exchanged.	Aggregate	Amount Already					
	Type of Security	Offering Price	Sold					
	Debt	S	\$					
	Equity	S	\$					
	☐ Common ☐ Preferred							
	Convertible Securities (including warrants)	<b>&gt;</b>	\$					
	Partnership Interests	\$	\$					
	Other (Specify LLC MEMBER INTERESTS	250,000	\$ 250,000					
	Total							
	Answer also in Appendix, Column 3, if filing under ULOE.							
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount					
		Investors	of Purchases					
	Accredited Investors		\$ 250,000					
	Non-accredited Investors		\$					
	Total (for filings under Rule 504 only)		\$					
	Answer also in Appendix, Column 4, if filing under ULOE.							
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.							
	Type of Offering	Type of Security	Dollar Amount Sold					
	Rule 505		\$					
	Regulation A		\$					
	Rule 504		\$					
	Total		\$					
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.							
	Transfer Agent's Fees		\$					
	Printing and Engraving Costs		\$					
	Legal Fees		\$					
	Accounting Fees		\$					
	Engineering Fees		\$					
	Sales Commissions (specify finders' fees separately)		\$					
	Other Expenses (identify)		\$					
	Total		\$ <i>O</i>					

<u> </u>	C. OFFERING PRICE, NUMBER OF IT	NVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price g and total expenses furnished in response to Part C — Question 4 proceeds to the issuer."	4.a. This difference is the "adjusted gross		s 250,000
5.	Indicate below the amount of the adjusted gross proceed to the each of the purposes shown. If the amount for any purpose check the box to the left of the estimate. The total of the paymer proceeds to the issuer set forth in response to Part C — Que			
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			
	Purchase of real estate	[	] \$	- S
	Purchase, rental or leasing and installation of machinery and equipment			\$
	Construction or leasing of plant buildings and facilities	[		
	Acquisition of other businesses (including the value of secu offering that may be used in exchange for the assets or secu issuer pursuant to a merger)	rities of another	רן \$	Г) \$
	Repayment of indebtedness			_
	Working capital	_		_
	Other (specify):	ſ	¬\$	□ <b>\$</b>
	INVESTMENT IN CHORUS SYS CUMULATIVE PREFERRED STO	stems INC.		
	Cumulative PREFERRED Sto	ck, Seaces A	\$	_\$ <u>250,00</u> 0
	Column Totals	[	〕\$	s 250,000
,	Total Payments Listed (column totals added)		<u> </u>	50,000
	D. FE	DERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the undersign nature constitutes an undertaking by the issuer to furnish to the information furnished by the issuer to any non-accredited in	U.S. Securities and Exchange Commis	sion, upon writte	tle 505, the following on request of its staff,
Lees	per (Print or Type) Signatur		Jota	

Signature

NC VENTURE GROUP LLC

Name of Signer (Print or Type)

Signature

Oliver A. Townsend

Title of Signer (Print or Type)

MANAGER

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)